

No. W 4777	Due no later than October 31, 2003 Annual Report Form		2. Registered Agent and Office NO PO BOX																			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable		EVELYN A WILSON 2265 DESOTO IDAHO FALLS, ID 83404																			
	E. T. HOME, L.L.C. PO BOX 3323 IDAHO FALLS, ID 83403 3323																					
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>MANAGER</td> <td>EVELYN A. WILSON</td> <td>2734 E. 105N.</td> <td>IDAHO FALLS</td> <td>ID</td> <td>83401</td> </tr> <tr> <td>MANAGER</td> <td>TERRELL R. HALE</td> <td>2408 BRIARCLIFF</td> <td>IDAHO FALLS, ID</td> <td>ID</td> <td>83404</td> </tr> </tbody> </table>					Office held	Name	Street or P.O. Address	City	State	Zip	MANAGER	EVELYN A. WILSON	2734 E. 105N.	IDAHO FALLS	ID	83401	MANAGER	TERRELL R. HALE	2408 BRIARCLIFF	IDAHO FALLS, ID	ID	83404
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MANAGER	TERRELL R. HALE	2408 BRIARCLIFF	IDAHO FALLS, ID	ID	83404																	
5. Organized Under the Laws of: IDAHO W 4777		6. Signature <u>Evelyn A. Wilson</u> Date <u>8-25-03</u> Name (Typed or Printed) <u>EVELYN A. WILSON</u> Title <u>MANAGER</u>																				

Issued 08/04/2003

Do Not Tape or Staple